



Federal Update for April 6 - 10, 2015



Agent Orange | C-123 Aircraft Update ► Justice Denied

"It is an outrage that the VA, in effect, is continuing to deny these veterans justice," said John Rowan, National President of Vietnam Veterans of America. "These VA bureaucrats attempting to delay justice ought to be relieved of their duties so that they can no longer abuse veterans with their tactic of 'delay, deny, until they die.' There is no excuse for why these worthy veterans are still not being treated with the appreciation and the respect their service warrants." Rowan praised Wes Carter, the leader of the C-123 Veterans Association, for his spunk and spirit: "You've got to keep on keeping on," Rowan urged, "and VVA will be at your side to convince the VA hierarchy that to continue to delay justice is to deny justice."

For over five years, retired Air Force Reserve Major Wes Carter has led the fight of his life: to get the Department of Veterans Affairs to acknowledge that the C-123 Provider military cargo planes which transported Agent Orange to and from Vietnam had, in fact, been contaminated with dioxin. A number of reputable scientists and epidemiologists at federal agencies have gone on record, endorsing Carter's stance that these craft remained hazardous to the health of the 2,100 crew members, flight nurses, and maintenance workers who serviced them between 1972 and 1982. "Yet the VA, in all its wisdom, maintained that these men and women who had been exposed to Agent Orange ought not be eligible to receive the same healthcare and disability compensation benefits that boots-on-the-ground veterans of Vietnam receive," Rowan noted.

"VVA has long supported Major Carter in his quest for justice," Rowan said. "When the Institute of Medicine (IOM) concluded, in a study funded by the VA, that the planes were actively contaminated when Air Force Reservists flew them, we were as pleased as Wes Carter, who exulted, 'We won!' The IOM report was released in January 2015, yet Major Carter and those who have been sickened with maladies the VA concedes are associated with exposure to Agent Orange have still not received the justice they deserve. Why? Because a few bad actors in the office of Public Health & Environmental Hazards at the VA continue their attempts to delay justice despite the conclusive report by the IOM." [Source: PR Newswire | March 23, 2015 ++]

VA Vet Choice Program Update ► Senate Bill Allows Under 40 miles

The Senate on 26 MAR unanimously passed legislation instructing the Veterans Affairs Department to allow veterans living within 40 miles of a VA facility to get non-VA care if the department hospital or clinic cannot provide the service. Sen. Jerry Moran (R-KS) filed the bill as an amendment to the Senate Budget Resolution, Moran spokeswoman Garrette Tuner said. The vote was 100-0. "We [expected] it to pass with broad support from both sides of the aisle," she said. Moran and other lawmakers backed the legislation even though many maintain the VA already has the authority to allow veterans within 40 miles of a VA clinic to use non-VA care when needed. The VA has claimed otherwise, however, arguing that Congress' intent – as spelled out last year in the conference report on the Veterans Choice Act – allows exemptions to veterans only when there are geographic problems accessing a VA facility.

VA Deputy Secretary Sloan Gibson cited that restriction on 25 MAR after Moran pressed him on language in the same report stating that lawmakers "do not intend the 40-mile eligibility criteria ... to preclude veterans who reside closer than 40 miles from a VA facility from accessing care through non-VA providers, particularly if the VA facility the veteran resides near provides limited services." Turner said that Moran's amendment will ensure VA administers the Choice Act "as Congress intended." It calls on the VA to provide veterans access to non-VA health care when the nearest VA medical facility within 40 miles drive time is incapable of offering the care the veteran seeks, she said. Now both the House and Senate Budget bills must go to a joint congressional committee to iron out their differences before the president can sign it into law. [Source: Military.com | Bryant Jordan | March 26, 2015 ++]

VA Aid & Attendance Update ► New Qualification Rule Proposed

The Department of Veteran's Affairs is proposing new rules on who can get monthly Aid & Attendance benefits. The VA feels the rules are needed to prevent people from "gaming" the system by giving away assets and then applying for aid. However, The Retired Enlisted Association (TREA) feels that there should be much more discussion before this vital benefit is restricted from people when it can help veterans desperate to stay at home and not go to a nursing home. The Aid & Attendance benefit provides money to needy veterans and surviving spouses who require daily assistance for necessary activities such as eating, bathing and dressing. For now, if a veteran or surviving spouse has less than \$80,000 in assets—not including a house or car—and that veteran has a high deductible medical expenses that net out his/her income, they may qualify. A single veteran's maximum monthly benefit is \$1,788, and a surviving spouse's is \$1,149, tax-free.

The proposed rules would establish a new combined net worth and income limit of \$ 119,220, impose a 36-month look-back period on asset transfers (like Medicaid's Congressionally-mandated five-year look-back period), and a penalty period of up to 10 years related to gifts. There's a new tougher definition of medical expenses deductible from income, and a proposed IRS matching program. The new gifting rules and penalties for making gifts (all gifts in the look-back period are presumed to have been made to qualify for benefits) are strict. There's no

allowance to give away money to your church, or say for a wedding gift to a grandchild. As an example, a veteran who gives away \$50,000 would get a 28-month penalty. That is, he wouldn't qualify for benefits for 28 months. A widow would be penalized for 44 months.

One of the main problems with the proposed rule is that it does not account for age: if a 65 year old veteran and an 85 year old veteran make a gift to get below the asset threshold, they are punished for the same amount of time. Under the current rules, the VA takes longevity into account to determine when net worth is excessive. Further, it currently takes six to nine months to process a new application. There is no telling how long the application process can take if the VA has to now go back through 3 years of financial records. [Source: TREA News for The Enlisted | March 16, 2015 ++]

VA Congressional Oversight Update ► VA & Congress Trade Barbs

A year after the Veterans Affairs Department was rocked by findings of hidden patient wait lists and manipulated records, House Republicans are accusing the department's new leadership of doing little to fix the transparency problems. In a rare evening hearing on 16 MAR, conservatives on the House Veterans' Affairs Committee accused VA officials and investigators at the independent VA Inspector General's office of withholding information from Congress, evading elected officials' requests and obstructing lawmakers' efforts to uncover problems. "It's uncertain whether VA understands the lessons in transparency it should have learned," said Rep. Jeff Miller (R-FL), committee chairman. "The committee is not a junior partner with VA in any respect, and certainly not when it concerns our obligation to conduct oversight," Miller said.

VA officials countered that they are trying to provide information to Congress, but without violating patient privacy and often with little guidance or assistance from lawmakers themselves. They also accused lawmakers of requesting information simply to leak embarrassing details to the media, rather than to try and solve the department's problems. "Right now, we're communicating through letters," said Leigh Bradley, VA general counsel. "We need a healthy dialogue. ... Right now, there is a lack of trust between us and the committee." Committee Republicans said they have more than 100 pending requests for information from VA that are still unfulfilled, including 63 more than two months past due. Bradley said more than 94 percent of congressional requests have been finished, a figure that Miller disputed. And conservatives on the committee say VA and its inspector general have covered up numerous other documents that showed deep-seated problems in the department, including investigations into over prescription of pain medicines at a Wisconsin hospital and reasons for cost overruns for new hospital construction in Colorado.

The often prickly hearing took place seven months into the tenure of new VA Secretary Bob McDonald, who promised better relations with Congress and more openness in departmental

affairs when he assumed office. Since then, he and his staff have received mixed reviews, with lawmakers praising his rhetoric but questioning whether any fundamental cultural changes have occurred. Meanwhile, Democrats on the committee questioned why Republicans shoehorned the transparency hearing into an evening session, implying the spectacle had more to do with politics than addressing VA's problems. Several said they had no knowledge that the committee had requested much of the information Miller accused the department of withholding, and said the majority party needs to work on its own transparency before criticizing others.

Without acknowledging any specific mistakes, Bradley said VA is committed to providing better information sharing with Congress, and to advancing their oversight goals. "But we need to be able to trust each other" when it comes to information requests about potentially sensitive records, she added. That drew grumbles from Republicans on the committee, who said it's not for VA to decide how Congress can do its work. "I don't care if you trust me or not, that's not important," Miller said. "What's important is the Constitution." [Source: MilitaryTimes | Leo Shane | March 17, 2015 ++]

VA Health Care Eligibility ► Net Worth No Longer a Factor

The Department of Veterans Affairs is updating the way it determines eligibility for VA health care, a change that will result in more Veterans having access to the health care benefits they've earned and deserve. Effective 2015, VA eliminated the use of net worth as a determining factor for both health care programs and copayment responsibilities. This change makes VA health care benefits more accessible to lower-income Veterans and brings VA policies in line with Secretary Robert A. McDonald's MyVA initiative which reorients VA around Veterans' needs. "Everything that we do and every decision we make has to be focused on the Veterans we serve," said VA Secretary Robert A. McDonald. "We are working every day to earn their trust. Changing the way we determine eligibility to make the process easier for Veterans is part of our promise to our Veterans."

Instead of combining the sum of Veterans' income with their assets to determine eligibility for medical care and copayment obligations, VA will now only consider a Veteran's gross household income and deductible expenses from the previous year. Elimination of the consideration of net worth for VA health care enrollment means that certain lower-income, non-service-connected Veterans will have less out-of-pocket costs. Over a 5-year period, it is estimated that 190,000 Veterans will become eligible for reduced costs of their health care services. In March 2014, VA eliminated the annual requirement for updated financial information. VA now uses information from the Internal Revenue Service and Social Security Administration to automatically match individual Veterans' income information which reduces the burden on Veterans to keep their healthcare eligibility up to date. That change better aligned VA's health care financial assessment program with other federal health care organizations. Veterans may submit

updated income information by visiting their nearby VA health care facility or at www.1010ez.med.va.gov. For more information call VA toll-free at 1-877-222-VETS (8387) or visit www.va.gov/healthbenefits. [Source: VA News Release | March 17, 2015 ++]

VA Claim Filing Update ► New Laws Require Standard Form Use

The days of being able to informally start disability claims with the Department of Veterans Affairs by writing a simple statement on a sheet of paper are over. That will no longer secure an effective date for the evaluation of an award. New laws going into effect 24 MAR will require claimants to use specific forms for claims and appeals. The new laws require that all claims to the VA be filed on standard forms, regardless of the type.

The VA states that abolishing the longtime practice of informally initiating veterans' disability claims will be one way of improving the quality and timeliness of processing. "These new processes will leave no doubt as to the effective dates of claims," said National Service Director Jim Marszalek. "Of course, our 3,815 National, Department and Chapter Service Officers, including County Veteran Service Officers accredited by DAV, are ready to help everyone get through and understand these new requirements." The new law eliminates the practice of using reports of hospitalizations, examinations and other medical records to serve as the start of informal claims for increase or to reopen while retaining the retroactive effective dates. The change also affects appeals. Under the new laws, the VA will accept an expression of dissatisfaction or disagreement with its decision as a Notice of Disagreement (NOD) only if it is submitted on a standardized form. There are three major components to these changes:

First. The traditional informal claims process is being standardized with a new standard form, *VA Form 21-0966, Intent to File a Claim for Compensation and/ or Pension, Survivors Pension, or Other Benefits*. The form is designed to capture information necessary to identify and support compensation, pension and other benefit claims. An individual or their representative can submit this form in order to establish a potential effective date for benefits and then take up to a year to gather the evidence necessary to support the claim. The form may be submitted electronically, on paper or over the phone. The form is electronically available through eBenefits. The form can be submitted there or in hard copy by mailing it to a DAV National Service Office. The form can also be completed by a VA call center representative over the phone or by a DAV National Service Officer (NSO).

These new processes will leave no doubt as to the effective dates of claims. Individuals seeking compensation or pension benefits will have a full year to gather and submit evidence necessary to support their claim. The new rule does not require that evidence necessary to support a claim be submitted in order for the claim to be recognized as complete and for the VA to take action. The new regulations allow the VA to award increased benefits retroactive to the date of

medical treatment, as long as the form is filed within one year of the treatment and the required claim form is filed within a year after that.

Second. If veterans want to file for compensation, they can do so online. If that is not possible or desirable, use of the EZ forms becomes mandatory under the new regulations.

- *VA Form 21-526EZ, Application for Disability Compensation and Related Compensation Benefits*, is needed for paper submissions.
- Pension claims must be filed on *VA Form 21-527EZ, Application for Pension*.
- Survivors' claims for dependency and indemnity compensation (DIC), survivors' pension and accrued benefits must be filed on *VA Form 21-534EZ, Application for DIC, Death Pension, and/or Accrued Benefits*. The EZ forms were previously available on an optional basis. Under the new regulations, the VA will mandate their use. Veterans and survivors do not have to file fully developed claims (FDCs) when using these mandatory forms, but the VA encourages FDC participation because it can expedite delivery of benefits through the FDC program.

Third. The changes mandate use of a standardized notice of disagreement form when a claimant wishes to initiate an appeal of a VA decision. Claimants will initiate the appeal of a decision with which they disagree by explaining their disagreement on *VA Form 21-0958, Notice of Disagreement*. DAV NSOs are being trained in these new laws and forms, and this will be a key topic in this year's Department and Chapter Service Officer Certification Training Program.

Veterans, family members and survivors should always feel free to contact their local DAV National Service Office with any questions about claims, appeals and compensation. Contact information for those offices can be found online at <http://www.DAV.org/veterans/find-your-local>. [Source: DAV Magazine | Mar/April Edition 2015 ++]

Agent Orange / C-123 Aircraft Update ► No Timeline for Decision

The VA said 13 MAR no date has been set for a decision on whether to award benefits for Agent Orange exposure to Air Force reservists who flew C-123 aircraft contaminated with the herbicide. The department is weighing the issue after a recent study confirmed the possibility of health risks as well as lobbying from veteran groups and former crew members. But it did not plan to make an announcement this week, despite an earlier indication by VA officials, spokeswoman Meagan Lutz said. There is no definite timeline for a decision, she said.

Veterans say herbicide residue left inside the aircraft from service during the Vietnam War sickened them and they deserve the VA health care coverage for Agent Orange-related conditions extended to nearly all servicemembers deployed to the war zone. The C-123s were used to spray during Operation Ranch Hand and were later brought back to the United States and repurposed as military cargo aircraft. About 1,500 to 2,100 personnel flew and trained on

the C-123 aircraft from the early 1970s to the 1980s. An Institute of Medicine study stoked the debate in January when it found that herbicide residue inside the planes could have exposed reservists to the disease-causing dioxins found in Agent Orange. "It is plausible that, at least in some cases ... the reservists' exposure exceeded health guidelines for workers in enclosed settings," the researchers wrote. "Thus, some reservists quite likely experienced non-trivial increases in their risks of adverse health outcomes."

VA Undersecretary for Benefits Allison Hickey told Stars and Stripes in early March that the department had planned to announce a decision on the benefits but was delaying it until 10 or 11 MAR though that never materialized [Source: Stars & Stripes | Travis J. Tritten | March 15, 2015++]

Government Debt Limit ► Impact on Vet's Pay & Benefits

The Treasury Department has suspended investments into federal employees' pensions, as the government officially hit its debt ceiling of about \$18.1 trillion on 16 MAR. The law allows the government to take "extraordinary measures" to avoid a default, including tapping into and suspending investments into the Civil Service Retirement and Disability Fund and halting the daily reinvestment of the government securities (G) fund, the most stable offering in the Thrift Savings Plan's portfolio. Halting the daily reinvestment into the TSP's G Fund temporarily will free up about \$195 billion in "headroom" under the limit -- the fund's current balance, according to Treasury. Tapping the CSRDF gives Treasury about \$20 billion in headroom over the next three months.

The law requires the Treasury secretary to refill the coffers of the G Fund and the Civil Service Retirement and Disability Fund once the issue of the debt ceiling is resolved and to make up, in addition, for any interest lost on those investments during the suspension. So, there is no effect on federal employees and retirees but things could get dicey if the government exhausts its wiggle room and runs out of cash. "Protecting the full faith and credit of the United States is the responsibility of Congress, because only Congress can extend the nation's borrowing authority," said Treasury Secretary Jack Lew in a 13 MAR letter to Congress announcing debt issuance suspension period beginning 16 MAR. "No Congress in our history has failed to meet that responsibility. The creditworthiness of the United States is not a bargaining chip, and I again urge Congress to address this matter without controversy or brinksmanship."

The Congressional Budget Office estimated that Treasury will run out money in October or November if Congress does not increase the debt ceiling before then. CBO noted that the government typically runs a large surplus in April when income taxes are due, which allows some extra time. That, as well as the extraordinary measures "should allow the Treasury to finance the government's normal operations for several months without an increase in the debt ceiling," the office stated in an analysis of the current situation. But if the government's

alternative financing options are exhausted, and Treasury runs low on cash before a new debt limit is agreed upon, “there could be delays in honoring checks and disruptions in the normal flow of government services,” a 1995 CBO report stated. That has never happened. But if it did, it would have serious economic consequences and possibly result in furloughs for federal employees.

There is no clear roadmap for agencies or federal employees to follow if Uncle Sam cannot pay his bills, making the situation much less predictable than, say, a government shutdown. The services and benefits that a default would adversely affect, could include:

- Military pay and retirement benefits
- Federal civil service salaries and retirement benefits
- Veterans' benefits
- Social Security and Medicare benefits
- Payments to defense contractors

The 2014 Temporary Debt Limit Extension Act suspended the debt ceiling, which is about \$18.1 trillion, through March 15, 2015. The last time the government hit the limit and Treasury tapped the G Fund was in February 2014, right before lawmakers passed the Temporary Debt Limit Extension Act. Sen. David Vitter, (R-LA) introduced legislation in January that would limit Treasury’s ability to tap the Civil Service Retirement and Disability Fund and G Fund to buy time to avoid a default. That bill is still in committee. In 2011, Congress and the Obama administration had contentious fights over raising the debt limit, leading to the 2011 Budget Control Act. That law suspended the ceiling -- and the battles over it -- until 2013. It also created the automatic, government-wide budget cuts known as sequestration, which began in 2013 and will return to full force on Oct. 1, 2015, unless Congress acts. [Source: GovExec.com | Kellie Lunney | March 16, 2014 ++]

Arlington National Cemetery Update ► New Burial Site Planned

Right now it’s a patch of green tucked in a corner of Arlington National Cemetery. But in the months to come, an Ohio lawmaker’s vision of a resting place for the unidentified fragments and unclaimed remains of soldiers who fought in Iraq and Afghanistan and future conflicts will become a reality. Rep. Steve Stivers, (R-Upper Arlington) began pushing for a “Place of Remembrance” in Arlington National Cemetery after reading news stories about the Dover Air Force Base mortuary sending cremated veterans’ remains to a Maryland landfill. A 2011 Washington Post story reported that between 2004 and 2006, a total of 976 fragments from 275 military personnel were incinerated and sent to a Maryland landfill. Stivers was appalled. He says all fragments of fallen service members — even the smallest — deserve a dignified burial site.

His proposal was not intended to replace the Tomb of the Unknowns — a tomb that includes the remains of one unidentified service member as a symbol for all unknown service members — but to give fragmented remains of those killed in Iraq and Afghanistan and all conflicts moving forward a proper burial. “This will be a working place of remembrance where additional fragmented remains can be buried for years to come,” he said. “Every piece deserves a dignified resting place.” Now, the designs of that place are nearing completion. Arlington National Cemetery will begin advertising to award a contract in mid-May. The cemetery aims to award a contract by late summer and begin construction by early fall. Stivers, who toured the site last week, said he was told it will be operational by next spring or summer.

When it’s completed, the site will be reminiscent of a cairn — a pile of rocks known as a traditional type of tomb. Underneath the cairn, a humidity-controlled vault will hold the cremated remains. Above it, those visiting can sit on a bench with a full view of the site and the graves that lie beyond it. The site is in an undeveloped area of the cemetery near the columbarium — a wall holding cremated remains of other veterans. Stivers, who has served nearly 30 years in the Ohio Army National Guard, said after The Washington Post story, the Defense Department changed its policy so future fragmentary remains would be scattered at sea. That’s appropriate, perhaps, for those who served in the Navy, but not as comforting for soldiers, who follow the principle of never leaving a fallen comrade behind. This site, he said, will provide an alternative.

His proposal was first pushed as legislation. Ultimately, Arlington National Cemetery agreed to move forward without it becoming law. Stivers hopes the families of missing servicemen and women might find the site a place of solace. “I don’t pretend it will be like President Kennedy’s grave or the Tomb of the Unknown Soldier,” he said “But if families can have a place to go and sit and remember their loved ones that would be great.” [Source: The Columbus Dispatch | Jessica Wehrman | March 23, 2015 ++]

Agent Orange ► Ten Things Every Vet Should Know

The Vantage Point blog at the Department of Veterans Affairs website has some very useful information that most veterans should be aware of. They report:

1. **Agent Orange was an herbicide and defoliant used in Vietnam.** Agent Orange was a blend of tactical herbicides the U.S. military sprayed from 1962 to 1971 during the Vietnam War to remove the leaves of trees and other dense tropical foliage that provided enemy cover. The U.S. Department of Defense developed tactical herbicides specifically to be used in "combat operations." They were not commercial grade herbicides purchased from chemical companies and sent to Vietnam. More than 19 million gallons of various "rainbow" herbicide combinations were sprayed, but Agent Orange was the combination the U.S. military used most often. The name "Agent Orange" came from the orange identifying stripe used on the 55-gallon drums in which it was stored. Heavily sprayed areas included forests near the demarcation zone, forests

at the junction of the borders of Cambodia, Laos, and South Vietnam, and mangroves on the southernmost peninsula of Vietnam and along shipping channels southeast of Saigon.

2. **Any Veteran who served anywhere in Vietnam during the war is presumed to have been exposed to Agent Orange.** For the purposes of VA compensation benefits, Veterans who served anywhere in Vietnam between January 9, 1962 and May 7, 1975 are presumed to have been exposed to herbicides, as specified in the Agent Orange Act of 1991. These Veterans do not need to show that they were exposed to Agent Orange or other herbicides in order to get disability compensation for diseases related to Agent Orange exposure. Service in Vietnam means service on land in Vietnam or on the inland waterways ("brown water" Veterans) of Vietnam.
3. **VA has linked several diseases and health conditions to Agent Orange exposure.** VA has recognized certain cancers and other health problems as presumptive diseases associated with exposure to Agent Orange or other herbicides during military service. Veterans and their survivors may be eligible for compensation benefits.
 - AL Amyloidosis. A rare disease caused when an abnormal protein, amyloid, enters and collects tissues or organs.
 - Chronic B-cell Leukemias. A type of cancer which affects a specific type of white blood Cell.Chloracne (or similar acneform disease). A skin condition that occurs soon after exposure to chemicals and looks like common forms of acne seen in teenagers. Under VA's rating regulations, it must be at least 10 percent disabling within one year of exposure to herbicides.
 - Diabetes Mellitus Type 2. A disease characterized by high blood sugar levels resulting from the body's inability to produce or respond properly to the hormone insulin.
 - Hodgkin's Disease. A malignant lymphoma (cancer) characterized by progressive enlargement of the lymph nodes, liver, and spleen, and by progressive anemia.
 - Ischemic Heart Disease. A disease characterized by a reduced supply of blood to the heart, that can lead to chest pain (angina).
 - Multiple Myeloma. A cancer of plasma cells, a type of white blood cell in bone marrow.
 - Non-Hodgkin's Lymphoma. A group of cancers that affect the lymph glands and other lymphatic tissue.
 - Parkinson's Disease. A progressive disorder of the nervous system that affects muscle movement ☐ Peripheral Neuropathy, Early-Onset. A nervous system condition that causes numbness, tingling, and muscle weakness. Under VA's rating regulations, it must be at least 10 percent disabling within one year of herbicide exposure.

- Porphyria Cutanea Tarda. A disorder characterized by liver dysfunction and by thinning and blistering of the skin in sun-exposed areas. Under VA's rating regulations, it must be at least 10 percent disabling within one year of exposure to herbicides.
 - Prostate Cancer. Cancer of the prostate; one of the most common cancers among older men.
 - Respiratory Cancers (includes lung cancer). Cancers of the lung, larynx, trachea, and bronchus.
 - Soft Tissue Sarcomas (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma). A specific group of malignant of cancers in body tissues such as muscle, fat, blood and lymph vessels, and connective tissues.
4. **Veterans who want to be considered for disability compensation must file a claim.** Veterans who want to be considered for disability compensation for health problems related to Agent Orange exposure must file a claim. During the claims process, VA will check military records to confirm exposure to Agent Orange or qualifying military service. If necessary, VA will set up a separate exam for compensation.
 5. **VA offers health care benefits for Veterans who may have been exposed to Agent Orange and other herbicides during military service.** Veterans who served in Vietnam between January 9, 1962, and May 7, 1975, are eligible to enroll in VA health care. Visit VA's health benefits explorer to check your eligibility and learn how to apply.
 6. **Participating in an Agent Orange Registry health exam helps you, other Veterans and VA.** VA's Agent Orange Registry health exam alerts Veterans to possible long-term health problems that may be related to Agent Orange exposure during their military service. The registry data helps VA understand and respond to these health problems more effectively. The exam is free to eligible Veterans and enrollment in VA health care is not necessary. Although the findings of your exam may be used to inform your subsequent care, they may not be used when applying for compensation as a separate exam is required. Contact your local VA Environmental Health Coordinator about getting an Agent Orange Registry health exam.
 7. **VA recognizes and offers support for the children of Veterans affected by Agent Orange who have birth defects.** VA has recognized that certain birth defects among Veterans' children are associated with Veterans' qualifying service in Vietnam or Korea.
 - Spina bifida (except spina bifida occulta), a defect in the developing fetus that results in incomplete closing of the spine, is associated with Veterans' exposure to Agent Orange or other herbicides during qualifying service in Vietnam or Korea.
 - Birth defects in children of women Veterans are associated with their military service in Vietnam but are not related to herbicide exposure. The affected child

must have been conceived after the Veteran entered Vietnam or the Korean demilitarized zone during the qualifying service period. Learn more about benefits for Veterans' children with birth defects at www.publichealth.va.gov/exposures/agentorange/benefits/children-birth-defects.asp.

8. **Vietnam Veterans are not the only Veterans who may have been exposed to Agent Orange.** Agent Orange and other herbicides used in Vietnam were used, tested or stored elsewhere, including some military bases in the United States. Other locations/scenarios in which Veterans were exposed to Agent Orange may include:
 - Korean Demilitarized Zone. Exposure along the demilitarized zone in Korea between April 1, 1968 and August 31, 1971
 - Thailand Military Bases. Possible exposure on or near the perimeters of military bases between February 28, 1961 and May 7, 1975
 - Herbicide Tests and Storage Outside Vietnam. Possible exposure due to herbicide tests and storage at military bases in the United States and locations in other countries.
 - Agent Orange Residue on Airplanes Used in Vietnam War. Possible exposure of crew members to herbicide residue in c-123 planes flown after the Vietnam War.
9. **VA continues to conduct research on the long-term health effects of Agent Orange in order to better care for all Veterans.** VA and other Federal government Departments and agencies have conducted, and continue to conduct, extensive research evaluating the health effects of Agent Orange exposure on U.S. Veterans. An example is the Army Chemical Corps Vietnam-Era Veterans Health Study designed to examine if high blood pressure (hypertension) and chronic obstructive pulmonary disease (COPD) are related to herbicide exposure during the Vietnam War. Researchers have completed data collection and aim to publish initial findings in a scientific journal in 2015. Learn more about Agent Orange related studies and their outcomes at <http://www.publichealth.va.gov/exposures/agentorange/research-studies.asp>.
10. **VA contracts with an independent, non-governmental organization to review the scientific and medical information on the health effects of Agent Orange.** VA contracts with the Institute of Medicine (IOM) of the National Academy of Sciences every two years to scientifically review evidence on the long-term health effects of Agent Orange and other herbicides on Vietnam Veterans. The IOM uses a team of nationally renowned subject matter experts from around the country to gather all the scientific literature on a topic, identify peer-reviewed reports, and then examine the studies to determine the most rigorous and applicable studies. The IOM looks for the highest quality studies. The IOM then issues its reports, including its conclusions and recommendations to VA, Congress, and the public. [Source: Beaufort Observer | George Schryer | March 16, 2015 ++]